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Navy & Marine Corps Medical News
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This service distributes medical news and information to Sailors and Marines, their families, civilian employees, and retired Navy and Marine Corps families. Further dissemination of this email is highly encouraged. Stories in MEDNEWS use these abbreviations after a Navy medical professional's name to show affiliation: MC - Medical Corps (physician); DC - Dental Corps; NC - Nurse Corps; MSC - Medical Service Corps (Navy researchers and administrative managers). Corpsmen and Dental Technician designators are identified in front of their names.

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Headline: Navy Cross awarded posthumously to corpsman
From the Bureau of Medicine and Surgery

WASHINGTON - It is a special occasion when a military member is awarded a medal for heroism. But when the medal is awarded 46 years after the heroic deed and the hero's death, it takes on an extra special meaning for the member's family.

Such is the case for Hospital Corpsman Third Class Joseph Francis Keenan, who sacrificed himself serving Marines of the Fifth Marines, First Marine Division during combat in the Republic of Korea in 1953. For his devotion to duty, Keenan was posthumously awarded the Navy Cross.

There is an interesting story behind this award because

it not only reveals the corpsman's courage, but it also reveals the dedication of a brother, Michael P. Keenan, determined to see an oversight corrected. But before the brother's story, there is Petty Officer Keenan's action.

It is the evening of March 26, 1953 in Korea. And in this part of the world, it is cold. A platoon of Marines is stashed in each of three outposts known as Carson, Reno and Vegas. Their positions are referred to as outposts because they are an early detection force forward of the Fifth Marines' main line of resistance. It could be said they are 120 Marines and a corpsman boxing with their chins poked out.

It just so happens that 3,500 Chinese communist soldiers are willing to put a knock out punch on those chins. They attack the three small outposts, and Keenan's company takes off to help Reno.

They are immediately pinned down by murderous artillery and mortar fire.

Keenan, amidst the explosions, high-speed metal fragments and screaming Marines, goes about treating the wounded. While taking care of casualties, Keenan is struck by shrapnel -- first in the hand and then in the head.

His training tells him his wounds can be life threatening, so he goes back to the medical aid station for cursory medical care. With treatment complete, he restocks his medical supplies and shoves off back to the fight.

He enters the battlefield, and there has been no cessation of gunfire, explosions and dying. Keenan continues moving from hole to hole and across open field, tending his Marines. But now death's hand selects the young corpsman in combat for the first time, and he is killed in action.

Three decades later, when he obtained his big brother's 1953 letters home, Michael Keenan began to discover more about his brother's death. As he found Marines and Sailors who knew him, Mike discovered that his brother had been nominated for a decoration for heroism on the night he died.

Over the next 15 years, Mike Keenan continued to seek survivors of the battle that killed his brother. From each contact he made, Mike found others who verified Keenan's heroic actions.

Mike assembled the supporting accounts and forwarded them to various military offices, hoping to spark some action to officially recognize his brother. Without the original documentation to substantiate the nomination for a decoration, Mike was told that no action would be taken.

Many years later, one copy of this package miraculously came to the historian's office at the Navy Bureau of Medicine and Surgery. Then Assistant Historian, Dr. David Klubes, gave the Keenan package renewed interest when he discovered a group of Hospital Corps data cards that had been removed from his files. All of these cards referenced hospital corpsmen who had received the Medal of Honor except

for one. That card referred to Petty Officer Joe Keenan.

Dr. Klubes mentioned his finding to Senior Chief Hospital Corpsman Mark Hacala, a Naval Reservist who returned to active duty to research the history of the Hospital Corps' centennial anniversary.

And as fate would have it, one day Hacala found himself staying in the same hotel where a Korean War reunion group was staying. It was Petty Officer Keenan's unit.

After more research and oral histories were gathered from Keenan's unit, a new package was created and resubmitted.

As the Marines formed across the parade deck at the Marine Barracks here May 12 for the weekly Friday evening parade, Commandant of the Marine Corps, Gen. Charles C. Krulak first conducted some overdue business.

Michael Keenan, now joined by his four brothers assembled in front of the commandant as Petty Officer Joseph Keenan's citation was read. Everyone there got a brief glimpse of that day's hell in Korea so many years before. And then Gen. Krulak presented the Navy Cross to Michael for his brother's "unselfish dedication to duty."

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Headline: TRICARE Family Member Dental Plan to increase premiums

From: TRICARE Management Activity

ALEXANDRIA, Va. -- The monthly premium for the TRICARE Family Member Dental Plan for active-duty families will increase on Aug. 1, 1999.

The rate for a single enrollment will increase from \$8.09 per month to \$8.53. Family enrollment that now costs \$20 per month will cost \$21.33.

Active-duty service members will see the premium increase reflected in their July 1999 Leave and Earnings Statements. Families who are signed up for the plan by their uniformed services sponsors on or after July 1, 1999 will be enrolled at the new rate.

The monthly premium that active-duty service members have deducted from their paychecks represents 40 percent of the total premium cost for the plan. The other 60 percent is paid by the government.

The dental contractor, United Concordia Companies, Inc., proposed these scheduled increases in their initial bid for the contract to cover expected increases in program costs. The government subsequently accepted these increases.

For information about the dental plan, write to United Concordia Companies, Inc., TRICARE Family Member Dental Plan Customer Service, P.O. Box 898218, Camp Hill, PA. 17089-8218. Or, you may call 1-800-866-8499.

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Headline: DoD funds brain research institute, provides grants

By Douglas J. Gillert, American Forces Press Service

GAINESVILLE, Fla. -- When service members suffer

battlefield injuries, their survival may depend on receiving the right treatment as quickly as possible.

Although the military services train and equip their medics to handle any emergency, DoD continues seeking better treatment methods. Medical research is key to improving health care and behind a DoD decision to contribute \$18 million toward the University of Florida's state-of-the-art Brain Institute.

Opened in October 1998, the institute provides laboratories and facilities for physicians and scientists to research new ways of treating brain trauma and spinal cord injuries. The institute's goal, according to Director William Luttge, is to help DoD, the Department of Veterans Affairs and medicine in general by transferring research findings to clinical practice as quickly as possible.

Besides co-funding the building with Veterans Affairs and the university, DoD has awarded large grants for research at the Brain Institute. Luttge said DoD is primarily interested in the long-term effects of brain trauma as well as of Parkinson's Disease.

For example, DoD awarded money for studies in juvenile leukemia, Parkinson's disease and estrogen treatment on brain injuries.

"We've gone out, we've got DoD money, and we're doing things that are relevant to DoD," he said. "What the institute provides them is laboratories equipped as well or better than any other lab in the world," he said.

In the surgical research and teaching laboratory, Dr. Richard Fessler manages 16 individual stations, each comprising a full surgical operating room setup. A part-time instructor at the Uniformed Services University of the Health Sciences, Bethesda, Md., Fessler said the laboratory is ideal for teaching new surgical techniques to physicians who have been in the field and want to update their skills. Closed-circuit TV monitors at each station allow them to observe an actual operation and practice the procedure on research cadavers. Each session is videotaped, so they have a permanent record, he said.

One objective is to shorten surgical procedures and get people out of the hospital and back on their feet sooner, he said.

Luttge said available courses will be announced at national medical meetings and on the institute's Web site at <http://www.ufbi.ufl.edu/>.

In an adjacent laboratory, Dr. Sanford Meeks manages a linear accelerator capable of producing high-energy X-rays that home in on damaged tissues while not affecting healthy tissues. Called radio surgery, the technique is used for cancerous diseases and benign lesions in the brain.

"We can get the accuracy down to about two-tenths of a millimeter," Meeks said.

Not everything at the institute, however, is geared to high-level research. Samsun Lampotang, a mechanical engineer, helped develop a medical manikin that simulates a

human patient. Currently, Gainesville-area paramedics train on the simulator at the institute every Friday, Lampotang said. They practice the same emergency medical procedures combat medics at far-forward locations need to know to save wounded combatants' lives. In fact, he said, the Army has begun purchasing the \$200,000 simulators from the Sarasota, Fla., manufacturer for medical training at several locations, including Fort Detrick, Md., and Fort Sam Houston, Texas.

Without the manikins for training and exercises, military medics have to rely on volunteers, whom they "mouflage," or apply with makeup that resembles various wounds.

"Trouble is, you can't make their blood pressure drop or their oxygen saturation drop, and you can't administer morphine and other drugs to volunteers, because they're healthy people," Lampotang said. "You can do all these things with the human patient simulator, which breathes, takes in drugs, simulates paralysis and can even be given tracheotomies."

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Headline: TRICARE Southeast and Humana win partnership award
From TRICARE Management Activity

ALEXANDRIA, Va. -- TRICARE Southeast and Humana Military Healthcare Services received the Astra Pharmaceuticals National Managed Health Care Congress Partnership Award March 30 in Atlanta, Ga., which recognized their managed health care achievements in Southeastern United States.

The award was jointly accepted by the Lead Agent for TRICARE Southeast, BGen. Robert F. Griffin, and Humana Military Healthcare Services Region 3 Executive Director, Dave Baker. The partnership is a collaboration between the Department of Defense and the Humana Military Healthcare Services team in Georgia, Florida and South Carolina.

The National Managed Health Care Congress Partnership award is given each year to healthcare partnerships in recognition of their efforts to improve quality and access to healthcare while reducing costs.

The team's nomination described their efforts to improve delivery of TRICARE health care benefits to their customers.

As a result of their team efforts, their customers reaped tremendous advances in the quality of care within their health care system, while enjoying increased access to care. Further, the cost of care - to beneficiaries and the government - was significantly reduced by the introduction of managed care principles to the region.

As part of the award, each partner received \$2,500 to donate to a worthy charity. Humana Military Healthcare Services and TRICARE Southeast presented a \$5,000 check to the Eisenhower Army Medical Center Fisher House at Fort Gordon, Ga., April 29. The Fisher House provides a home away from home for families of patients receiving treatment at the Eisenhower Army Medical Center or local medical

facilities.

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Headline: Beaufort establishes HELP connection
From Naval Hospital Beaufort

BEAUFORT, S.C. -- Naval Hospital Beaufort recently opened the Health Education and Lifestyle Planning or HELP connection, to address prevention, wellness and general health education issues for customers at the beginning of their healthcare.

The HELP connection is based on the principles of "Put Prevention Into Practice" and it reflects Navy Medicine's focus on managing health not illness.

Customers using the HELP connection are educated about self-care initiatives and use of resources, as well as increasing their awareness through individual counseling to change behaviors that risk men, women and children's health.

The HELP Center, primarily staffed by a family nurse practitioner and a community health nurse, emphasizes its good business practice by conveniently scheduling its services for customers on an appointment or walk-in basis.

The Center's support is further enhanced by networking with the Primary Care Clinics, the TRICARE Service Center and community agencies. By using these resources, the Center's customer's can be provided with referrals to meet immediate healthcare needs based on initial screenings and interviews.

All of these steps help ensure the best care possible for the Center's customers. The Center also established goals as markers toward achieving excellent customer service:

- Provide personalized screening and evaluation of the customer's current prevention and wellness needs.
- Act as a link between the patient and resources - providing recommendations and referrals for further education and follow-up.
- Encourage own self-care by using wellness education to develop a healthier lifestyle.
- Guide customers on the best use of the Beaufort Military Healthcare System.
- Act as a resource advocate for ongoing prevention education for customers.

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Headline: Training course teaches treating biological warfare injuries
From Defense Medical Readiness Training Institute

Physicians have the opportunity to earn 11.5 Continuing Medical Education credits after participating in the "Medical Response to Biological Warfare and Terrorism" distance learning program.

The 6, two-hour module program, produced by the U.S. Army Medical Research Institute of Infectious Diseases, Fort Dietrick, Md., along with the Centers for Disease Control and the Food & Drug Administration, began May 17. The

programs is broadcast at military treatment facilities that are subscribers to HealthNet, a national distance learning network.

The program will be re-broadcast June 14-21. Some military treatment facilities may already have a copy of the program in their libraries. The program's content includes identifying the current threat of biological warfare and the impact on healthcare facilities, plus the tools to identify and treat patients' symptoms.

To obtain continuing education credit instantly, participants take the test for the program and print their own certificate on a special Internet website.

The US Army Medical Command and the Defense Medical Readiness Training Institute, both at Fort Sam Houston, Texas, became partners with Texas Tech University Health Sciences Center in Lubbock, Texas and Swank Healthcare Services in St. Louis, Mo., to provide this program to medical treatment facilities and civilian hospitals nationwide. The program will be broadcast over the national Distance Learning Network, HealthNet.

The "Medical Response to Biological Warfare and Terrorism" program is a new use of the HealthNet network, which already provides accredited continuing education programs and patient education to military and civilian hospitals in the United States and overseas.

Regardless of how and when the programs are viewed, all military personnel are welcome to take the exam on the website at no cost.

For the "Medical Response to Biological Warfare and Terrorism" program calendar, testing details and further information about HealthNet continuing education programs offered by satellite, visit the Swank/HealthNet website <http://www.swankhealth.com> or call Swank Healthcare Services at 800-950-4248.

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Headline: Dental technicians honored for assisting accident victim

By Kevin Sforza, National Naval Medical Center

FAIRFAX, Va. -- Two National Naval Dental Center, Bethesda, Md., Dental Technicians, who showed the right instincts when they responded to a road accident in Fairfax County, Va., Nov. 24, 1998, were presented the Fairfax County Police Department's Citizens Award here April 28.

Dental Technicians Third Class Caren Hildebrand of Pennsville, N.J., and Latisha Turner, of Chattanooga, Tenn., were recognized for their instinct, caring and willingness to come to the aid of an accident victim by the Fairfax County Chief of Police, Colonel J. Thomas Manger, during a ceremony at the county's Public Safety Building.

Hildebrand said the incident happened quickly. "I was driving down the road and all of a sudden there was this car with smoke coming out of it on the side and I saw the woman lying on the ground. Nobody else was stopping, so I pulled

over. Latisha called 911 while I went over to help."

When Turner returned, she and Hildebrand stabilized the woman.

Turner provided another service for the injured woman by responding to her request for Turner to call her parents and let them know what hospital she was taken to.

The two petty officers remained on the scene to provide further assistance after a local emergency medical technician team arrived.

In their letter of commendation the two good citizens received recognition for their timely intervention, civic pride and commitment to help others.

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Headline: Full force training at Pensacola

By Rod Duran, Naval Hospital Pensacola, Public Affairs

PENSACOLA, Fla. -- For the second consecutive spring, the collaboration between Naval Hospital Pensacola and its Integrated Medical Support Training Program Reservists continues to prove that there is just one Navy medical team when it comes to supporting the Fleet's, family members' and retirees' health needs.

More than 140 Naval Reserve personnel arrived here to support an operational exercise at both Naval Hospital Pensacola and its Fleet Hospital Pensacola field hospital training set last week. The Reservists are part of the Navy's Integrated Medical Support Training Program and train in case the active duty hospital staff deploys.

"When we walked out into our Fleet Hospital training set it was like being in another world," said Fleet Hospital Pensacola Commanding Officer, CAPT Christine Bruzek-Kohler, NC.

The mock war exercise placed the fleet hospital into the fictional country of Nevar, where there were injured troops that needed medical care. The medical staff received more than 35 patients, stabilized them, and evacuated them to the nearest military treatment facility - about two football field lengths away.

Reservists and active duty personnel, who continued the exercise late into the day, received the injured at the Naval Hospital.

"We've got the best Navy Medicine team in the world," Naval Hospital Pensacola Commanding Officer, CAPT Robert D. Hufstader, MC, told the gathered group of reservists that came from as far away as St. Louis, Dallas and Oklahoma City.

During Desert Storm, when CAPT Hufstader was executive officer of Naval Hospital Pensacola, it took about four months to get a medical team from the hospital deployed and reservists in to fill the need of medical care at home, he said.

"With the way world events are now we won't have that kind of time next time around," said Hufstader. "We have a

sophisticated Navy Medicine team, but there's no magic to it. It's hard work over a long period of time."

The Reserve Commanding Officer of the Integrated Medical Support Program, CAPT Marcellus Grace, MSC, the dean of pharmacology at Xavier University in New Orleans, complimented the reservists for their efforts in conducting the annual training during graduations and Mother's Day.

"You responded to the call and performed admirably without a single appointment being missed," said Grace.

Grace led the Reserve contingent into Pensacola for the second consecutive year in support of fleet hospital training. This was his final large training operation. A new commanding officer will be named in June.

The reservists will return to Pensacola in October when Fleet Hospital Pensacola travels to Camp Pendleton, Calif., for evaluation training.

"Every time I sit at my command post in the Integrated Medical Support Training Program office, I could look out the window at this simulated fleet hospital, and it became a visual representation of the reality of just how integral our Naval Reserve program is to the Naval Hospital's strategic plan," said Grace.

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Headline: Groton laboratory receives accreditation
From Naval Ambulatory Care Center Groton

GROTON, Conn. -- The laboratory at Naval Ambulatory Care Center, Groton, has been awarded a two-year accreditation by the Commission on Laboratory Accreditation of the College of American Pathologists, based on the results of a recent onsite inspection.

The College of American Pathologists Laboratory Accreditation Program is recognized by the federal government as being equal to or more stringent than the government's own inspection program.

Inspectors examine the records and quality control of the laboratory for the preceding two years, as well as the education and qualifications of the staff, the adequacy of the facilities, the equipment, laboratory safety and laboratory management to determine how well the laboratory is serving the patient.

The College of American Pathologists is a medical society serving more than 14,500 physician members and the laboratory community throughout the world. It is the world's largest association composed exclusively of pathologists and is widely considered the leader in laboratory quality assurance.

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Anthrax question and answer

Question: I know a common reaction to the anthrax vaccine is some pain and swelling at the injection site, but how long should this last?

Answer: Pain and swelling following an anthrax vaccination, much like in other shots service members receive, can occasionally last beyond a few days. Although some may experience minor pain and swelling, others may have no reaction at all.

How long inflammation and discomfort at the injection site lasts is variable, and largely depends on each person's immune system. In unusual circumstances, an infection can develop, which would require treatment. With anthrax vaccinations development of a nodule or lump under the skin at the injection site is not uncommon. This may last for several weeks before it resolves. When the next dose in the series is due it should be administered in the opposite arm. If you have a question regarding a reaction to an immunization, consult your health care provider.

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TRICARE question and answer

Question: Does the enrollment fee for TRICARE Prime have to be paid all at once, or can it be paid in installments?

Answer: It is permissible to pay the Prime enrollment fee in quarterly installments. There is no additional administrative fee for quarterly payments.

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Healthwatch: Pregnancy and exercise - natural and necessary (part 2)

By Dr. Pete Singson, MSC and LT Heather Agustines, MSC
U. S. Naval Hospital, Yokosuka

YOKOSUKA, Japan -- In Part 1 of "Pregnancy and Exercise," we talked about the importance of exercise during a time in an expectant mother's life when staying fit is more important than ever.

Aerobic exercise increases the body's oxygen storage capacity and your overall level of fitness, can help relieve stress, give you an overall sense of well being and aid in your postpartum endeavors to regain your pre-pregnancy shape. The other components to a good exercise program are strength training and stretching.

Strength Training -- Don't let your blossoming belly discourage you from a safe strengthening program which, believe-it-or-not, can include crunches and weight lifting. For abdominal strengthening exercises, remember to lie flat on your back after the 12th week of pregnancy.

The recommended modification is to place a pillow or rolled up towel under one side of your back, thus shifting your weight off your back. An alternative is to perform basic side-lying crunches, whichever is the most comfortable for you and your changing body - the key is comfort and modification.

If you begin to feel a slight separation (or diastasis) in the middle of your belly as you perform your crunches, you should further modify your position. Place a sheet under your back and cross the ends over your belly to the

opposite hands. Then, as you lift to perform a crunch, gently pull the ends of the sheet towards you, compressing your belly slightly - this will help relieve some of the widening and extra stress on your stomach muscles.

Weight lifting can also be safe to continue during pregnancy, as long as you remember to maintain good posture and to keep your weights below the recommended twenty-five pound limit (this goes for anything you lift in your daily life.).

Using machines like nautilus requires less balance on your part, and therefore may be easier and safer than free weights. You can consult a qualified personal trainer to assist you in finding an appropriate lifting routine that will meet your needs.

Stretching -- Stretching is one of the most important things you can continue to do throughout your pregnancy. Not only does stretching before and after exercise help to prevent injury, but it can also help minimize some of the common discomforts of pregnancy.

For instance, low back pain is one of the most common complaints of pregnancy. The incidence of low back pain increases as pregnancy progresses, probably as a result of the change in your center of gravity and therefore your posture as your belly expands.

A regular exercise routine that includes some very gentle low-back stretching exercises can help minimize the amount of back pain experienced. A good stretch to begin with is a "back press."

To perform this stretch, stand with your back against a wall and your feet about shoulder width apart and two feet out from the wall. Press your lower back against the wall, trying to achieve full contact between the two. You should feel slight stretching of your back muscles at this time - hold this position for 30 seconds, and then release.

Do this stretch once or twice a day, or more frequently as needed. You can also add a thigh-strengthening component to this stretch by sliding about six inches down the wall, once you've performed the low back press. Hold this for ten seconds, then return to the starting position - repeat ten times once or twice a day.

Another common complaint with pregnancy is a "charlie horse" or muscle spasm in your calf or thigh muscles. While the exact cause of this is unknown, we do know that pointing your toes, causing the calf muscles to perform a sustained contraction, can induce these painful muscle spasms.

To minimize occurrence of these spasms, you should not only avoid the pointed-toe position, but also perform regular stretching exercises for your calf muscles.

You can stretch your calf muscles by standing on an elevated surface, such as a step or a large dictionary, with the ball of your foot. Then gently press your heel towards the floor, until you feel a gentle stretch in your calf muscle. Hold this position for 30 seconds, relax, and

repeat again. You can also do this stretch with your knee bent, to provide focus to the lower portion of your calf muscles.

The best medicine in the case of an inadvertent muscle spasm is to gently grab your toes and straighten your knee until a stretch is felt in your calf and hold for thirty seconds. Continue this until the cramp has resolved.

Whatever form of exercise you choose to do, it's important to remember a few training tips to avoid injury to you and your baby (adapted from American Council of Government's Guide to Planning for Pregnancy, Birth and Beyond - 1997):

- Avoid brisk exercise in hot, humid weather or when you are sick with a fever.

- Avoid jerky, bouncy, or high-impact motions. Activities that call for jumping, jarring motions or quick changes in direction may strain your joints and cause pain. Low-impact exercise is best.

- Monitor your level of exertion as you exercise. Exercising should be comfortable, and not taxing. Make sure you can carry on a conversation during aerobic exercise.

- Get regular exercise, and avoid spurts of heavy exercise followed by long periods of no activity.

- Wear a bra that fits well and supports your breasts.

- Avoid deep knee bends, full sit-ups, double leg raises, and straight leg-toe touches.

- After 12 weeks of pregnancy, avoid exercises that require lying with your back on the floor for more than a few minutes. You can modify this position by placing a pillow or a rolled up towel under your side, thus shifting your body's weight toward the left side of your body.

- Always include proper warm-up and cool-down for at least 5 minutes before and after exercise.

- The extra weight you are carrying will make you work harder as you exercise at a slower pace - modify your aerobic intensity to those levels which are comfortable and do not make you feel faint, dizzy, or breathless.

- Get up from the floor slowly and gradually to avoid feeling dizzy or fainting.

- Drink water often before, during, and after exercise to be sure your body gets enough fluids. Take a break in your workout to drink more water as needed.

- Keep moving! Don't stand motionless for long periods of time.

- Stop exercising and consult your doctor or nurse if you get any of these symptoms, and they are unusually severe: pain, vaginal bleeding, dizziness or feeling faint, shortness of breath, irregular or rapid heartbeat, difficulty walking, or pain in your back or pubic area.

If you have any specific concerns regarding exercise during your pregnancy, you should discuss them with your health care provider. Any general questions can be answered by the OB-GYN clinic at 243-8741 or the Physical Therapy clinic at 243-5348.

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Comments about and ideas for MEDNEWS are welcome. Story submissions are encouraged. Contact MEDNEWS editor, Earl W. Hicks, at email: mednews@us.med.navy.mil; Telephone 202/762-3223, (DSN) 762-3223, or fax 202/762-3224.

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